

## PHYSICAL SCALE

Ages 0-0 to 1-11: Start at Item P1

P1. When the child is lying on his/her stomach, does the child hold his/her head up, without support, for at least 1 minute? ..... Yes No

**SAMPLE**

Ages 2-0 to 3-11: Start at Item P9

P9. Does the child walk well enough, without support, to go about the house without repeatedly falling or bumping into objects? ..... Yes No

**SAMPLE**

Ages 4-0 to 5-11: Start at Item P16

P16. Does the child stack (make a tower of) eight objects, such as blocks? ..... Yes No

**SAMPLE**

Ages 6-0 and Older: Start at Item P21

P21. Does the child use child-safe scissors with one hand to cut paper or cloth?

The other hand can be used to hold the paper or cloth, or the material can be held for the child. The child must be able to use the scissors to cut rather than to merely tear. ....

Yes No

SAMPLE

## ADAPTIVE BEHAVIOR SCALE

Ages 0-0 to 1-11: Start at Item A1

A1. When the child is hungry or thirsty and sees a bottle or bared breast,  
does he/she anticipate feeding by some action? ..... Yes No

SAMPLE

Ages 2-0 to 3-11: Start at Item A9

A9. Does the child take off shoes or socks without help?  
The shoes may be unfastened before the child takes them off.  
This must be as an act of undressing, not just as a form of play. .... Yes No

SAMPLE

Ages 4-0 to 5-11: Start at Item A16

A16. Does the child put on his/her shoes? It is not necessary that  
the child put them on the right feet or tie or fasten them  
to be rated Yes on this item. .... Yes No

SAMPLE

Ages 6-0 and Older: Start at Item A21

A21. Does the child purposefully use a mouse, touchpad, or other computerized pointing device to point and click on objects on a computer screen? ..... Yes No

SAMPLE

(0-37)



## SOCIAL-EMOTIONAL SCALE

Ages 0-0 to 1-11: Start at Item S1

S1. When the child is upset, does human contact frequently have a positive, calming effect? ..... Yes No

SAMPLE

Ages 2-0 to 3-11: Start at Item S9

S9. Does the child frequently show interest in exploring new places, such as a friend's house or a neighbor's yard, by actually moving into and around these places?  
Just looking (without physical exploration) is not sufficient to rate this item Yes. .... Yes No

SAMPLE

Ages 4-0 to 5-11: Start at Item S16

S16. Does the child show, by asking or gestures, the need to go to the toilet?  
The gestures must be more than just acting jumpy. They must show the child is trying to let someone know that he/she needs to go to the toilet. .... Yes No

SAMPLE



Ages 6-0 and Older: Start at Item S21

S21. Does the child know that some things belong to other people by asking permission to use them instead of just taking them? Does the child also know that the owner has first choice and may not let the child have it at all? ..... Yes No



## COGNITIVE SCALE

Ages 0-0 to 1-11: Start at Item G1

G1. Does the child laugh, clearly showing joy? ..... Yes No

SAMPLE

Ages 2-0 to 3-11: Start at Item G9

G9. Can the child point to at least one body part, either on himself/herself  
or on a doll, when asked? ..... Yes No

SAMPLE

Ages 4-0 to 5-11: Start at Item G16

G16. Does the child say size words (large or big, and little or small) often and correctly?  
Using the words only in some game (e.g., "How big is baby?") is  
not enough to be rated Yes. .... Yes No

SAMPLE

Ages 6-0 and Older: Start at Item G21

G21. Does the child draw a cross, one vertical line and one intersecting horizontal line (+), after an adult makes one? ..... Yes No

SAMPLE

(0-38)

# COMMUNICATION SCALE

Ages 0-0 to 1-11: Start at Item M1

M1. Does the child usually look toward the source of a sound when it starts,  
such as a person beginning to talk? ..... Yes No

SAMPLE

M18. Does the child understand at least three of the following four nonverbal gestures:  
(1) shoulder shrug to communicate "I don't know" or "I'm not sure"; (2) touching index  
finger to lips to indicate "be quiet"; (3) thumbs-up as an indication of "okay";  
(4) a wink either as a friendly greeting or to communicate "I'm just kidding"? ..... Yes No

SAMPLE

(0-34)

# Scoring/Profile Form

by Gerald D. Alpern, Ph.D.  
Illustration by Joy Allen



# Developmental Profile 3

## DP-3



Child's name: \_\_\_\_\_

Child's gender:  Male  Female

Examiner's name: \_\_\_\_\_

YEAR MONTH

Date of testing: \_\_\_\_\_

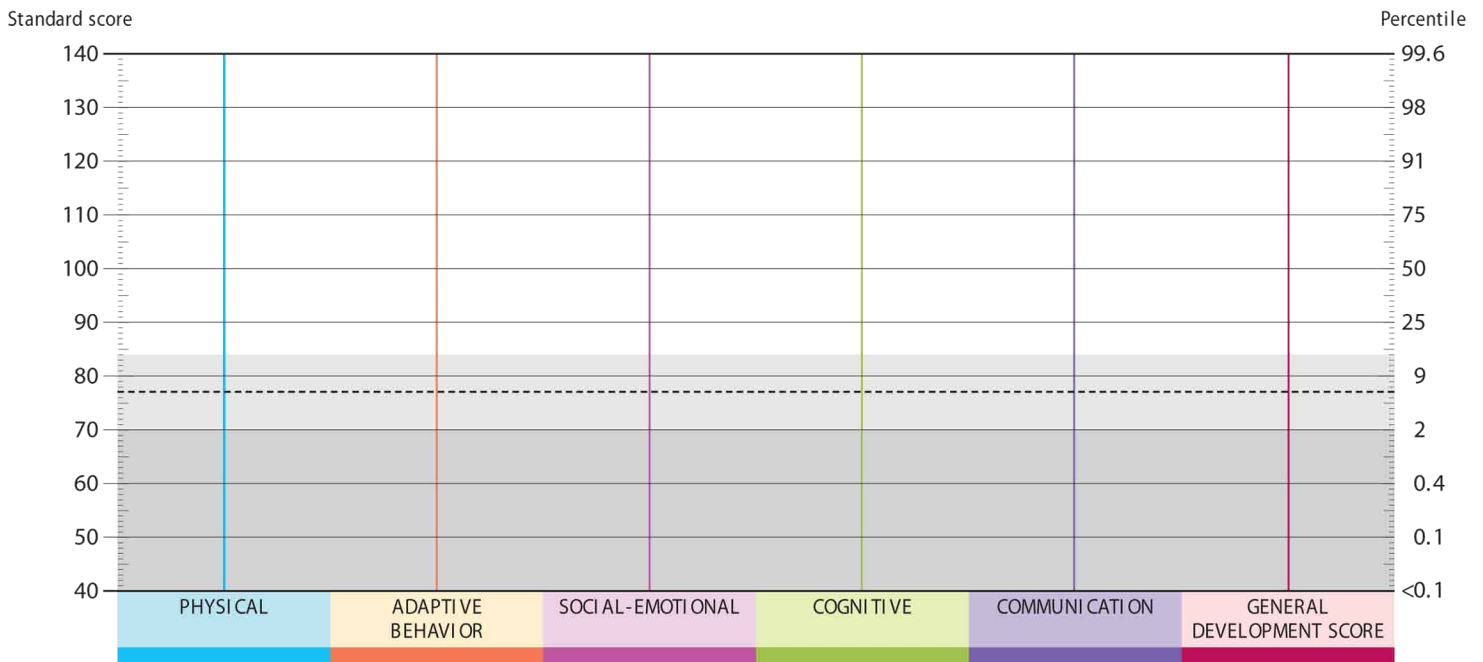
Informant's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Age: \_\_\_\_\_

Scale	Raw score	Standard score	Confidence band <input type="checkbox"/> 95% <input type="checkbox"/> 90%	Descriptive category	Percentile rank	Age equivalent
PHYSICAL						
ADAPTIVE BEHAVIOR						
SOCIAL-EMOTIONAL						
COGNITIVE						
COMMUNICATION						
Sum of standard scores: _____						
GENERAL DEVELOPMENT SCORE						



Notes: \_\_\_\_\_